Case 16-10039 Doc 1 Filed 01/20/16 Page 1 of 58

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
MIDDLE DISTRICT OF NORTH CAROLINA		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	□Chapter 11	
	□Chapter 12	
	□Chapter 13	☐ Check if this an amended filing

B 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	Scott	
	your government-issued picture identification (for	First name	First name
	example, your driver's	Allen	
	license or passport).	Middle name	Middle name
	Bring your picture	Randolph	
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have	ve	
	used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2754	

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Debtor 1 Scott Allen Randolph

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■I have not used any business name or EINs. Business name(s) EINs	have not used any business name or EINs. Business name(s) EINs
5.	Where you live	11789 Trinity Rd. Trinity, NC 27370	If Debtor 2 lives at a different address:
		Number, Street, City, State & ZIP Code Randolph County	Number, Street, City, State & ZIP Code County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this	Check one: Over the last 180 days before filing this petition, I
	, ,	petition, I have lived in this district longer than in any other district.	have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Case number (if known)

7.	The chapter of the Bankruptcy Code you are				f each, see <i>Notice Required by</i> page 1 and check the appropriat	11 U.S.C. § 342(b) for Individuals Filing for Ba e box.	nkruptcy
	choosing to file under	■ Cha	pter 7				
		□Cha	pter 11				
		□Cha	pter 12				
		□Cha	pter 13				
8.	How you will pay the fee	_ a	about how yo	ou may pay. Typio attorney is subm	cally, if you are paying the fee yo	k with the clerk's office in your local court for n urself, you may pay with cash, cashier's checl alf, your attorney may pay with a credit card or	k, or money
					Ilments. If you choose this option (Official Form 103A).	on, sign and attach the Application for Individua	als to Pay
			request that out is not req	nt my fee be waiv uired to, waive yo	yed (You may request this option our fee, and may do so only if yo	n only if you are filing for Chapter 7. By law, a jur income is less than 150% of the official povee in installments). If you choose this option, y	erty line
		C	out the <i>Appli</i> o	cation to Have the	e Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition	۱.
9.	Have you filed for bankruptcy within the	■No.					
	last 8 years?	□Yes.					
			District		When	Case number	
			District		When	Case number	
			District		When	Case number	
10.	Are any bankruptcy cases pending or being	■No					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□Yes.					
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your residence?	■No.	Go to I	ine 12.			
	residence:	□Yes.	Has yo	our landlord obtair	ned an eviction judgment agains	t you and do you want to stay in your residenc	e?
				No. Go to line 12	2.		
				Yes. Fill out Initi	al Statement About an Eviction	Judgment Against You (Form 101A) and file it	with this

Debtor 1 Scott Allen Randolph

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Der	Scott Allen Rando	ирп			Case Humber (# known)
Par	t 3: Report About Any Bu	sinesses	You Own	as a Sole Proprie	tor
12.	Are you a sole proprietor of any full- or part-time business?	■No.		Part 4.	
		□Yes.	Name	and location of bus	siness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Sta	te & ZIP Code
	it to this petition.		Chec	k the appropriate bo	ox to describe your business:
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as d	lefined in 11 U.S.C. § 101(53A))
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))
				None of the above	e
you a small business		deadline operation	s. If you ir	ndicate that you are ow statement, and	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure
	Bankruptcy Code and are you a small business debtor? For a definition of small	■No.	I am r	not filing under Chap	oter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□No.	I am f Code.		11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		□Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	Penart if You Own or	· Have An	, Hazardo	us Property or Δn	y Property That Needs Immediate Attention
	Do you own or have any		y i iazai uc	us i roperty of Air	y Froperty That Needs infiliediate Attention
14.	property that poses or is alleged to pose a threat of imminent and	■No. □Yes.	What is	the hazard?	
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs		Where is	s the property?	
	urgent repairs?				Number, Street, City, State & Zip Code

Debtor 1 Scott Allen Randolph Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a

mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

reasonably tried to do so.

Active duty. I am currently on active

military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive	a briefing about credit
counseling because of:	

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to

be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried

to do so.

Active duty. I am currently on active military duty

in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Dep	tor 1 Scott Allen Rando	olph		Case number	er (if known)
Part	6: Answer These Questi	ions for Re	porting Purposes		
16.	What kind of debts do you have?	16a.		onsumer debts? Consumer debts are defonal, family, or household purpose."	ined in 11 U.S.C. § 101(8) as "incurred by an
			■No. Go to line 16b.		
			■Yes. Go to line 17.		
		16b.		usiness debts? Business debts are debts estment or through the operation of the bus	
			□No. Go to line 16c.		
			☐Yes. Go to line 17.		
		16c.	State the type of debts you o	we that are not consumer debts or busine	ss debts
		-			
17.	Are you filing under Chapter 7?	□No.	I am not filing under Chapter	7. Go to line 18.	
	Do you estimate that after any exempt property is excluded and			Oo you estimate that after any exempt proper will be available to distribute to unsecure	
	administrative expenses		■No		
	are paid that funds will be available for		□Yes		
	distribution to unsecured creditors?				
18.	How many Creditors do you estimate that you	■1-49 □50-99		□1,000-5,000 □5001-10,000	□25,001-50,000 □50,001-100,000
	owe?			☐10,001-25,000	☐More than100,000
19.	How much do you	□\$0 - \$50	0,000	□\$1,000,001 - \$10 million	□\$500,000,001 - \$1 billion
	estimate your assets to be worth?		- \$100,000	\$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion
			01 - \$500,000	□\$50,000,001 - \$100 million □\$100,000,001 - \$500 million	□\$10,000,000,001 - \$50 billion □More than \$50 billion
		\$500,00	01 - \$1 million		Divide than \$50 billion
20.	How much do you	□\$0 - \$50		□\$1,000,001 - \$10 million	□\$500,000,001 - \$1 billion
	estimate your liabilities to be?		1 - \$100,000	□\$10,000,001 - \$50 million □\$50,000,001 - \$100 million	□\$1,000,000,001 - \$10 billion □\$10,000,000,001 - \$50 billion
			01 - \$500,000 01 - \$1 million	□\$100,000,001 - \$500 million	☐More than \$50 billion
Part					
For	you		•	clare under penalty of perjury that the infor	•
		United Sta	ates Code. I understand the re	elief available under each chapter, and I c	·
		If no attor document	ney represents me and I did r , I have obtained and read the	not pay or agree to pay someone who is n e notice required by 11 U.S.C. § 342(b).	ot an attorney to help me fill out this
		I request	elief in accordance with the c	chapter of title 11, United States Code, spe	ecified in this petition.
		bankrupto 1519, and	y case can result in fines up t 3571.	concealing property, or obtaining money to \$250,000, or imprisonment for up to 20	or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341,
		Scott Al	Allen Randolph len Randolph of Debtor 1	Signature of Debto	or 2
		Executed	on January 20, 2016 MM / DD / YYYY	Executed on MN	1/DD/YYYY

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Debtor 1	Scott Allen Randolph	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ B. Peter Signature of	r Jarvis Attorney for Debtor	Date	January 20, 2016 MM / DD / YYYY
B. Peter Ja	arvis		
Tennant La	aw Offices, PC		
P.O. Box 4 Archdale,	NC 27263		
Number, Street, Contact phone	City, State & ZIP Code 336-431-9155	Email address	Tennantlaw@triad.twcbc.com
46149 Bar number & St	ate		

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	n this information to identify your ca	co:			
	n this information to identify your ca				
Deb	or 1 Scott Allen Randolp First Name	Middle Name	Last Name		
Deb		Middle Name	Loot Name		
` '	. 0,		Last Name		
Unit	ed States Bankruptcy Court for the:	MIDDLE DISTRICT OF I	NORTH CAROLINA		
Case (if kno	e number			- Charl	if this is an
(II KIIC	wii)			_	if this is an ded filing
					· ·
∩ff	icial Form 106Sum				
		d Liabilities an	d Certain Statistical Information	,	12/15
			are filing together, both are equally responsible		
infor		first; then complete th	ne information on this form. If you are filing amer		
-		w Gammary and onco.	it the box at the top of this page.		
Part	1: Summarize Your Assets				
				Your as	ssets of what you own
	Cahadula A/D. Dranarty /Official Farm	- 400A/D)		value o	. Mac you om
1.	Schedule A/B: Property (Official Form 1a. Copy line 55, Total real estate, from	n Schedule A/B		\$	203,000.00
	1b. Copy line 62, Total personal proper	rty, from Schedule A/B		\$	38,210.00
	1c. Copy line 63, Total of all property o	n Schedule A/B		\$	241,210.00
Part	2: Summarize Your Liabilities				
					abilities
				Amoun	t you owe
2.	Schedule D: Creditors Who Have Clair 2a Copy the total you listed in Column		(Official Form 106D) the bottom of the last page of Part 1 of <i>Schedule D</i> .	\$	264,006.00
2	•		, -		
3.	Schedule E/F: Creditors Who Have Un 3a. Copy the total claims from Part 1 (ns) from line 6e of <i>Schedule E/F</i>	. \$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured c	laims) from line 6j of <i>Schedule E/F</i>	. \$	49,952.00
		, , , ,			,
			Your total liabilities	\$	313,958.00
					<u>, </u>
Part	3: Summarize Your Income and Ex	xpenses			
4.	Schedule I: Your Income (Official Form	ı 106I)		_	
	Copy your combined monthly income f	rom line 12 of Schedule	· I	. \$	3,200.00
5.	Schedule J: Your Expenses (Official Fo			\$	3,206.00
				Ψ	
Part	4: Answer These Questions for Ac	Iministrative and Statis	stical Records		
6.	Are you filing for bankruptcy under to No. You have nothing to report on	• • •	heck this box and submit this form to the court with y	our other so	hedules.
7.	■ Yes What kind of debt do you have?				
			debts are those "incurred by an individual primarily for g for statistical purposes. 28 U.S.C. § 159.	r a personal	, family, or
	Your debts are not primarily co		ve nothing to report on this part of the form. Check the	າis box and ເ	submit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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Debtor 1 Scott Allen Randolph

Case number (if known)

 From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

3,200.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total clai	m
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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	formation to identify your case	and this innig.	
Debtor 1	Scott Allen Randolph First Name	Middle Name Last Name	
Debtor 2			
(Spouse, if filing)	First Name	Middle Name Last Name	
United States	Bankruptcy Court for the: MIDI	DLE DISTRICT OF NORTH CAROLINA	
Case number	r		☐ Check if this is an amended filing
Official I	Form 106A/B		
	ule A/B: Propert	ey .	12/15
□No. Go to F		est in any residence, building, land, or similar property?	
	ie is the property:		
1.1 11789	Trinity Rd ress, if available, or other description	What is the property? Check all that apply. ■ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.
1.1 11789	Trinity Rd	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Je Investment property	amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Current value of the portion you own?
1.1 1789 Street addi	Trinity Rd ress, if available, or other description NC 27370-0	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one.	Current value of the entire property? Current value of the portion you own? \$203,000.00 Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.
1.1 11789 Street addi Trinity City	Trinity Rd ress, if available, or other description NC 27370-0 State ZIP Cod	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one. Debtor 1 only	amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? \$203,000.00 Current value of the portion you own? \$203,000.00 Current value of the portion you own? \$203,000.00
1.1 1789 Street addi	Trinity Rd ress, if available, or other description NC 27370-0 State ZIP Cod	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one.	amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? \$\frac{203,000.00}{203,000.00}\$ Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.
1.1 11789 Street addi Trinity City Rando	Trinity Rd ress, if available, or other description NC 27370-0 State ZIP Cod	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Other information you wish to add about this it	amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? \$203,000.00 Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. Fee simple Check if this is community property (see instructions)

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Deb	tor 1 S	cott Allen	Randolph		Case number (if known)	
3. C	ars, vans,	trucks, trac	ctors, sport utility ve	hicles, motorcycles		
	No					
	Yes					
3.1	Make:	BMW		Who has an interest in the property? Check or		ured claims or exemptions. Put
	Model:	428i	_	Debtor 1 only	the amount of any	secured claims on Schedule D: /e Claims Secured by Property.
	Year:	2014		Debtor 2 only	Current value of t	he Current value of the
	Approxin	nate mileage:	50,000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other inf	ormation:		☐At least one of the debtors and another		
	90% N	ADA			¢25.460	00 625 460 00
				Check if this is community property (see instructions)	\$35,460	\$35,460.00
				(coo mon donorio)		
5 A				n for all of your entries from Part 2, include that number here		\$35,460.00
Part	3: Descri	be Your Perso	onal and Household Ite	ms		
Doy	ou own o	or have any	legal or equitable in	terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
			furnishings			ciamio or exemplione.
		Major applia	nces, furniture, linens	, china, kitchenware		
_	No					
	Yes. Des	scribe	Annlianasa			\$600.00
			Appliances			
			Furniture			\$1,000.00
			Lawn Mower			\$200.00
		Televisions a including ce	and radios; audio, vide Il phones, cameras, m	eo, stereo, and digital equipment; computers, nedia players, games	, printers, scanners; music o	collections; electronic devices
			TV			\$500.00
E	xamples:	other collect	d figurines; paintings, iions, memorabilia, co	prints, or other artwork; books, pictures, or o llectibles	ther art objects; stamp, coir	n, or baseball card collections;
L	Yes. Des	cribe				
E	xamples:			nd other hobby equipment; bicycles, pool tabl	es, golf clubs, skis; canoes	and kayaks; carpentry tools;
	Yes. Des	cribe				

Official Form 106A/B

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Debte	or 1	Scott	Allen R	andolp	oh		Case numbe	r (if known)	
-	irearm								
_	•	es: Pisto	ols, rifles	, shotgu	ns, ammunition,	and relat	ed equipment		
	No Yes. D	escribe.							
	lothes Exampl		ryday clo	thes, fu	rs, leather coats,	designer	wear, shoes, accessories		
	No								
•	Yes. D	escribe		Clath				٦	\$200.00
			ļ	Clothi	ing				Ψ200.00
10 l	ewelry								
			ryday jew	elry, co	stume jewelry, e	ngageme	nt rings, wedding rings, heirloom jewelry, watch	es, gems, ç	gold, silver
	Yes. L	escribe	 [Jewel	rv			٦	\$50.00
			l	OCWCI	ı y				
13 N	on-far	m anim	als						
-			s, cats, b	irds, ho	rses				
	No								
ப	Yes. D	escribe.							
	-	er pers	onal and	house	hold items you	did not a	Iready list, including any health aids you did	not list	
	No Voc. G	ivo cno	cific infor	mation					
Ц	163. C	ive spe		mation.	•••				
15	Add th	e dolla	r value o	f all of	vour entries fro	m Part 3	including any entries for pages you have at	tached	
								laciloa	\$2,550.00
								L	
			ur Financi						
Do y	ou owi	n or hav	e any le	gal or e	equitable interes	st in any	of the following?		Current value of the portion you own?
									Do not deduct secured
									claims or exemptions.
16. C		es: Mon	ev vou h	ave in v	our wallet. in vou	ır home. i	n a safe deposit box, and on hand when you file	e vour petiti	on
_	No		, you	a.c,	ou			, , o a. , p o	o
	Yes								
17. D	eposit	s of mo	ney						
E	Exampl						certificates of deposit; shares in credit unions, the same institution, list each.	brokerage l	houses, and other similar
	No	111311	tutions. I	i you na	ive muniple acco	unto with	the same institution, list each.		
	Yes						Institution name:		
				17.1.	Checking		Community One		\$200.00
				17.2.	Checking		Community One		\$0.00
18 R	onds	mutual	funds o	r nublic	cly traded stock	re			
							ge firms, money market accounts		
	No				In a site of a con-				
	Yes				Institution or iss	uer name	:		
				ck and	interests in inc	orporate	d and unincorporated businesses, including	an interes	t in an LLC, partnership,
	ınd joi: No	nt ventu	ıre						

Official Form 106A/B Schedule A/B: Property

	Case 10-100.	39 DOC 1 Filed 01/2	10/16 Page 13 01 58	
Debtor 1	Scott Allen Randolph		Case number (if known)	
■Yes.	Give specific information about them Name of entity: Randolph Disas	ter Restoration, Inc.	% of ownership: 100 %	\$0.00
Negot	nment and corporate bonds and other r tiable instruments include personal checks negotiable instruments are those you cannot	, cashiers' checks, promissory not	es, and money orders.	
	Give specific information about them			
_	Issuer name:			
<i>Exam</i> ■No	ment or pension accounts ples: Interests in IRA, ERISA, Keogh, 4010 List each account separately.	(k), 403(b), thrift savings accounts	, or other pension or profit-sharing pla	าร
<u> </u>	Type of account:	Institution name:		
Your s Exam ■No	ity deposits and prepayments share of all unused deposits you have mad ples: Agreements with landlords, prepaid r		vater), telecommunications companies	, or others
∐Yes		institution name or mai	viduai.	
23. Annui ■ No	ties (A contract for a periodic payment of r	noney to you, either for life or for a	a number of years)	
_Yes	Issuer name and description	on.		
	sts in an education IRA, in an account in .C. §§ 530(b)(1), 529A(b), and 529(b)(1). Institution name and descri		under a qualified state tuition progra of any interests.11 U.S.C. § 521(c):	ım.
25. Trusts ■No	s, equitable or future interests in proper	ty (other than anything listed in	line 1), and rights or powers exerci	sable for your benefit
□Yes.	Give specific information about them			
<i>Exam</i> ■No	ts, copyrights, trademarks, trade secrets ples: Internet domain names, websites, pro-			
<i>Exam</i> ■No	ses, franchises, and other general intan ples: Building permits, exclusive licenses,		liquor licenses, professional licenses	
⊔res.	Give specific information about them			
Money or	property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
■No	funds owed to you Give specific information about them, inclu	iding whether you already filed the	returns and the tax years	
29. Family Exam	y support ples: Past due or lump sum alimony, spou	sal support, child support, mainter	nance, divorce settlement, property se	ttlement

☐Yes. Give specific information.....

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De	ebtor 1	Scott Allen Randolph	Case number (if known)	
30.		amounts someone owes you ples: Unpaid wages, disability insurance payments, disability ber benefits; unpaid loans you made to someone else	nefits, sick pay, vacation pay, workers' compe	ensation, Social Security
	■No □Yes.	Give specific information		
31.	Exam	sts in insurance policies ples: Health, disability, or life insurance; health savings account	(HSA); credit, homeowner's, or renter's insura	ance
	■No □Yes. I	Name the insurance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
32.	If you	terest in property that is due you from someone who has di- are the beneficiary of a living trust, expect proceeds from a life in one has died.		ceive property because
		Give specific information		
33.		s against third parties, whether or not you have filed a lawsuples: Accidents, employment disputes, insurance claims, or right		
	□Yes.	Describe each claim		
	■No	contingent and unliquidated claims of every nature, including Describe each claim	ng counterclaims of the debtor and rights t	o set off claims
35.	Any fii ■No	nancial assets you did not already list		
	□Yes.	Give specific information		
36		the dollar value of all of your entries from Part 4, including a art 4. Write that number here		\$200.00
Pa	rt 5: De	escribe Any Business-Related Property You Own or Have an Interest I	n. List any real estate in Part 1.	
_	_	own or have any legal or equitable interest in any business-related proto Part 6.	pperty?	
[⊒Yes. G	o to line 38.		
Pa		escribe Any Farm- and Commercial Fishing-Related Property You Owr you own or have an interest in farmland, list it in Part 1.	n or Have an Interest In.	
46.	No.	u own or have any legal or equitable interest in any farm- or Go to Part 7. Go to line 47.	commercial fishing-related property?	
				Current value of the portion you own?
				Do not deduct secured claims or exemptions.
Pa	rt 7: De	escribe All Property You Own or Have an Interest in That You Did Not	List Above	
53.		u have other property of any kind you did not already list? ples: Season tickets, country club membership		
		Give specific information		
54	. Add	the dollar value of all of your entries from Part 7. Write that	number here	\$0.00

Official Form 106A/B Schedule A/B: Property page 5

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Debt	or 1 Scott Allen Randolph		Case number (if known)	
Part 8	List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$203,000.00
56.	Part 2: Total vehicles, line 5	\$35,460.00		
57.	Part 3: Total personal and household items, line 15	\$2,550.00		
58.	Part 4: Total financial assets, line 36	\$200.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+ \$0.00		
62.	Total personal property. Add lines 56 through 61	\$38,210.00	Copy personal property total	\$38,210.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$241,210.00

Official Form 106A/B Schedule A/B: Property page 6

91C (09/13)

UNITED STATES BANKRUPTCY COURT MIDDLE DISTRICT OF NORTH CAROLINA

	Matter of: Allen Randolph) Case No		
			DEBTOR'S CLA	AIM FOR PROPERTY EX	(EMPTIONS
		Debtor.)		
	B)(A), (B), and (C), t ☐ Check if the	he Laws of the State of North	by claim the following property Carolina, and non-bankruptcy amount of interest that exceed residence.	federal law.	
1.	BURIAL PLOT. (Select appropriate e Total net v Total net v	NCGS 1C-1601(a)(1)). exemption amount below: value not to exceed \$35,000. value not to exceed \$60,000. (debtor as tenant by the entiret	Debtor is unmarried, 65 years of ies or joint tenant with rights of	of age or older, property	was previously
	ption of tv & Address	Market Value	Mtg. Holder or Lien Holder(s)	Amt. Mtg. or Lien	Net Value
Property & Address 11789 Trinity Rd Trinity, NC 27370 Randolph County Appraisal value (4/30/2015)		C	Ocwen Loan Servicing Santander	137,000.00 31,264.00	34,736.00
	- (((a) Total Net Value Fotal Net Exemption (b) Unused portion of exemption This amount, if any, may be obtained in any property own (C-1601(a)(2)).	earried forward and used to clai	\$ \$ m an	34,736.00 34,736.00 264.00
2.			ing property is claimed as exent to property held as tenants by		§ 522(b)(3)(B) and
	ption of ty & Address -	Market Value	Mtg. Holder or Lien Holder(s)	Amt. Mtg. or Lien	Net Value
3.	MOTOR VEHICI exempt not to excee		Only one vehicle allowed under	this paragraph with net v	value claimed as
Year, Model	of Auto	Market Value	Lien Holder(s)	Amt. Lien	Net Value
(b) An		ve to be used in this paragrapl nay be used as needed.)	\$ 1. \$		
· · -	. (3)22		et Exemption \$		
4.			OFESSIONAL BOOKS. (No claimed as exempt not to exceed		ed by debtor or

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0.1	$\boldsymbol{\mathcal{C}}$	(00/12)	
91	C	(09/13)	

,	ription IE-	Market Value	Lien Holder(s)		Amt. Lien	Net Value
(b) A	tatutory allowance Amount from 1 (b) above to be use A part or all of 1 (b) may be use		h.	\$ \$	2,000		
		Total N	let Exemption	\$	0.00		
5.	PERSONAL PROPERTY DEBTOR'S DEPENDENT debtor plus \$1,000 for each of	S. (NCGS 1C-1601)	(a)(4). Debtor's	aggregate in	nterest, not to e	exceed \$5,000 in v	
Appli	ription iances	Market Value 600.00 200.00	Lien Holder(s)		Amt. Lien	Net Value 600.00 200.00
Cloth		1,000.00					1,000.00
Jewe		50.00					50.00
Lawr	n Mower	200.00					200.00
					Total N	et Value	2,050.00
(a) S	tatutory allowance for debtor			\$	5,000		
(b) S	statutory allowance for debtor's		ependents at	T	<u> </u>		
	00 each (not to exceed \$4,000 to				0.00		
	Amount from 1(b) above to be use A part or all of 1 (b) may be use		1.				
	F (c)				Total Nat E		2,050.00
					Total Net Ex	temption	2,030.00
6.	LIFE INSURANCE. (As pr	ovided in Article X	, Section 5 of N	orth Carolin	a Constitution.)	
	Name of Insurance Company -NONE-	\Policy No.\Name o	of Insured\Policy	√ Date\Name	e of Beneficiary	7	
7.	PROFESSIONALLY PRE 1C-1601(a)(7). No limit on			DEBTOR	OR DEBTOR	'S DEPENDENT	S). (NCGS
	Description: -NONE-						
8.	DEBTOR'S RIGHT TO R I amount.)	ECEIVE FOLLOV	VING COMPE	NSATION:	: (NCGS 1C-16	501(a)(8). No limi	t on number or
	B. \$ -NONE- Con	mpensation for person mpensation for deatl mpensation from pri	n of person of w	hom debtor	was dependent		at for support.
9.	INDIVIDUAL RETIREMI TREATED IN THE SAME REVENUE CODE. (NCGS DEFINED IN 11 U.S.C. § 5	ENT PLANS AS DE EMANNER AS AN S 1C-1601(a)(9). No	EFINED IN TI INDIVIDUAL	HE INTERN L RETIREN	NAL REVENU MENT PLAN	UNDER THE IN	TERNAL
	Detailed Description -NONE-					Val	ue

0.10	(00/12)
910	(09/13)

10.	(NCGS 1C-1601(a)(10). Tota within the preceding 12 month	I net value not to e s not in the ordina	exceed \$25,000 and may not include a ry course of the debtor's financial affa and will actually be used for the child	any funds placed in a airs. This exemption	college saving plan applies only to the
	Detailed Description -NONE-			V	alue
11.	UNITS OF OTHER STATES	S, TO THE EXT	REMENT PLAN OF OTHER STA ENT THOSE BENEFITS ARE EXI I. (NCGS 1C-1601(a)(11). No limit of	EMPT UNDER THI	
12.	on amount to the extent such p Description:		NTENANCE AND CHILD SUPPO nably necessary for the support of De		
13.	HAS NOT PREVIOUSLY B	EEN CLAIMED	ERTY WHICH DEBTOR DESIRE ABOVE. (NCGS 1C-1601(a)(2). T) which has not been used for other ex-	he amount claimed m	
Chec	ription king: Community One king: Community One	Market Value 200.00 0.00	Lien Holder(s)	Amt. Lien	Net Value 200.00 0.00
Rand	lolph Disaster bration, Inc. 6 ownership	0.00			0.00
(a) To	otal Net Value of property claime	d in paragraph 13.		\$	200.00
		which were used in Paragraph 3(b) Paragraph 4(b) Paragraph 5(c)	the following paragraphs: \$		264.00 264.00 200.00
14.	OTHER EXEMPTIONS CL	AIMED UNDER	THE LAWS OF THE STATE OF		NA:
	NONE- FOTAL VALUE OF PROPERTY	CLAIMED AS E	XEMPT	\$	0.00
15.	EXEMPTIONS CLAIMED	UNDER NON-BA	ANKRUPTCY FEDERAL LAW:		
	NONE- FOTAL VALUE OF PROPERTY	CLAIMED AS E	ХЕМРТ		0.00
16. R l	ECENT PURCHASES				

The exemptions provided in NCGS 1C-1601(a)(2), (3), (4), and (5) are inapplicable with respect to tangible personal property purchased by the debtor less than 90 days preceding the initiation of judgment collection proceedings or the filing of a petition for bankruptcy, unless the purchase of the property is directly traceable to the liquidation or conversion of property that may be exempt and no additional property was transferred into or used to acquire the replacement property.

List tangible personal property purchased by the debtor less than 90 days preceding the filing of the bankruptcy petition:

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91C (09/13)

Description -NONE-	Market Value	Lien Holder(s)	Amt. Lien	Net Value
DATE January 20, 2016		/s/ Scott Allen Randolph		
		Scott Allen Randolph		
		Debtor		

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Fill in this informa	ation to identify you	ır case:				
Debtor 1	Scott Allen Ran	dolph				
Debior 1	First Name		st Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name Las	st Name			
United States Bank	kruptcy Court for the:	MIDDLE DISTRICT OF NORTH CA	AROLINA			
Case number						
(if known)					☐ Check	if this is an
					amend	ed filing
000000	400D					
Official Form	106D					
Schedule D	D: Creditors	Who Have Claims Se	cured	by Property	/	12/15
		f two married people are filing together, bo , number the entries, and attach it to this fo				
1. Do any creditors ha	ave claims secured by	your property?				
■No. Check th	is box and submit th	is form to the court with your other sche	edules. You	have nothing else to	report on this form.	
	Il of the information b			•		
	Secured Claims					
				Column A	Column B	Column C
		nore than one secured claim, list the creditor starticular claim, list the other creditors in Part 2		Amount of claim	Value of collateral	Unsecured
		er according to the creditor's name.		Do not deduct the	that supports this	portion
2.1 Ally Financ	ial	Describe the property that secures the cl	aim·	value of collateral. \$54,062.00	claim \$0.00	If any \$54,062.00
Creditor's Name	iai	2015 Chevrolet 2500 HD		φ34,002.00	φυ.υυ	Ψ34,002.00
		2013 Cheviolet 2300 HD				
P.O. Box 38	30901	As of the date you file, the claim is: Check apply.	all that			
Bloomingto	on, MN 55438	Contingent				
Number, Street, C	City, State & Zip Code	Unliquidated				
		Disputed				
Who owes the deb	t? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		■An agreement you made (such as mortga	age or secure	b		
Debtor 2 only		car loan)				
Debtor 1 and Debto	r 2 only	Btatutory lien (such as tax lien, mechanic	s lien)			
At least one of the	debtors and another	☐Judgment lien from a lawsuit				
Check if this claim community debt		☐Other (including a right to offset)				
community debt						
Date debt was incurr	red 2015	Last 4 digits of account number	249x			
2.2 BMW Bank	of North			444 000 00	* 05 400 00	*** *** ***
America		Describe the property that secures the cl	aim:	\$41,680.00	\$35,460.00	\$6,220.00
Creditor's Name		2014 BMW 428i 50,000 miles				
		90% NADA				
PO Box 360	าล	As of the date you file, the claim is: Check	all that			
Dublin, OH		apply. Contingent				
	City, State & Zip Code	□Jnliquidated				
		Disputed				
Who owes the deb	t? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as mortga	age or secure	d		
Debtor 2 only		car loan)				
Debtor 1 and Debto	r 2 only	☐Statutory lien (such as tax lien, mechanic	s lien)			
☐At least one of the o	debtors and another	☐Judgment lien from a lawsuit				
Check if this claim		☐Other (including a right to offset)				
community debt						
Date debt was incurr	red 2014	Last 4 digits of account number	001x			

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Debtor 1 Scott Allen Randolph		Case number (if know)		
First Name Middle I	Name Last Name			
2.3 Ocwen Loan Servicing	Describe the property that secures the claim:	\$137,000.00	\$203,000.00	\$0.00
Creditor's Name	11789 Trinity Rd Trinity, NC 27370 Randolph County Appraisal value (4/30/2015)			
12650 Ingenuity Dr. Orlando, FL 32826	As of the date you file, the claim is: Check all that apply. Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	Disputed Nature of lien. Check all that apply.			
Debtor 1 only	■An agreement you made (such as mortgage or sect	ured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐Statutory lien (such as tax lien, mechanic's lien)			
☐At least one of the debtors and another	Judgment lien from a lawsuit			
Check if this claim relates to a community debt	□Dther (including a right to offset)			
Date debt was incurred 2005	Last 4 digits of account number 440x			
2.4 Santander	Describe the property that secures the claim:	\$31,264.00	\$203,000.00	\$0.00
Creditor's Name	11789 Trinity Rd Trinity, NC 27370 Randolph County Appraisal value (4/30/2015)			
PO Box 841002 Boston, MA 02284	As of the date you file, the claim is: Check all that apply. Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	Disputed Nature of lien. Check all that apply.			
■Debtor 1 only □Debtor 2 only	An agreement you made (such as mortgage or section)	ured		
Debtor 1 and Debtor 2 only	<u>_</u>			
At least one of the debtors and another	☐Statutory lien (such as tax lien, mechanic's lien) ☐Judgment lien from a lawsuit			
Check if this claim relates to a community debt	Dther (including a right to offset)			
Date debt was incurred 2005	Last 4 digits of account number 174x			
If this is the last page of your form, add	Column A on this page. Write that number here:	\$264,006.00 \$264,006.00	7	
Write that number here:		Ψ20-1,000.00		
Part 2: List Others to Be Notified f	or a Debt That You Already Listed			
to collect from you for a debt you owe to	pe notified about your bankruptcy for a debt that you a someone else, list the creditor in Part 1, and then list ed in Part 1, list the additional creditors here. If you do	the collection agency here. S	imilarly, if you have mor	re than one
-NONE-	On which lin	ne in Part 1 did you ent	er the creditor?	
	Last 4 digits	of account number		

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Fill in	this information to id	entify your c	ase:			.					
Debto		llen Randol									
Dobte	First Name	ileli Kalluoi	Middle Name	Last	Name						
Debto	or 2 e if, filing) First Name		Middle Name	Loot	Name						
(Spousi	e ii, iiing) First Name										
United	d States Bankruptcy Co	urt for the:	MIDDLE DISTRICT C	F NORTH CAF	ROLINA						
Case (if know	number _(n)							[☐ Check amend	if this is	an
	cial Form 106E edule E/F: Cre		Who Have Un	secured	Claims		·				12/15
any exe Schedu D: Cred the Cor numbe	complete and accurate as ecutory contracts or unex ule G: Executory Contract ditors Who Have Claims S ntinuation Page to this par r (if known).	pired leases the s and Unexpire ecured by Prop ge. If you have	at could result in a clain d Leases (Official Form perty. If more space is n no information to repor	n. Also list exect 106G). Do not in eeded, copy the	utory contracts clude any credi Part you need, f	on Schedule tors with par- ill it out, num	A/B: Pro tially sec ber the	perty (Offi cured claim entries in t	cial Form is that are he boxes o	106A/B) a listed in t on the left	and on Schedule t. Attach
Part 1											
1.	Do any creditors have pr	riority unsecure	ed claims against you?								
	No. Go to Part 2.										
2.	■Yes. List all of your priority u identify what type of claim possible, list the claims in Part 1. If more than one co (For an explanation of eac	it is. If a claim halphabetical ordereditor holds a p	as both priority and nonpoler according to the credit articular claim, list the oth	riority amounts, lis or's name. If you l er creditors in Par	et that claim here have more than t rt 3.	and show bot	th priority	and nonpri	ority amour	nts. As mu	uch as
2.1						Total claim		Priority amount		Nonprio amount	•
	Employment Secu	urity Comm	Last 4 digits of a	ccount number	xxx	\$	0.00	\$	0.00	\$	\$0.00
	Priority Creditor's Name P.O. Box 26504 Raleigh, NC 2761	1	When was the de	ebt incurred?		_ `		. •			
	Number Street City State	e Zlp Code	As of the date yo	ou file, the claim	is: Check all tha	at apply					
	Who incurred the debt	? Check one.	Contingent								
	Debtor 1 only										
	Debtor 2 only		Unliquidated								
	Debtor 1 and Debtor 2	only?	Disputed								
	☐At least one of the deb	otors and anothe	er .								
	Check if this claim is	for a commun	nity Type of PRIORIT	Y unsecured cla	im:						
Is the claim subject to offset? Domestic support obligations											
	■No		☐Faxes and certa	ain other debts yo	u owe the goverr	nment					
	□ Yes		☐Claims for deat	h or personal inju	ry while you were	intoxicated					
			Other. Specify	Wage	es, salaries,	and comr	nissio	ns			
				notic	e only						

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Debtor 1 Scott Allen Randolph Case number (if know) 2.2 Internal Revenue Service Unknown \$ Unknown \$ Unknown Last 4 digits of account number XXX Priority Creditor's Name P.O. Box 7346 When was the debt incurred? Philadelphia, PA 19101-7346 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Contingent Debtor 1 only Debtor 2 only Unliquidated Debtor 1 and Debtor 2 only Disputed ☐At least one of the debtors and another Type of PRIORITY unsecured claim: □Check if this claim is for a community debt Is the claim subject to offset? Domestic support obligations No Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated □Yes □Other. Specify tax debt 2.3 **North Carolina Department of** Revenue Unknown \$ Unknown \$ Unknown Last 4 digits of account number Priority Creditor's Name P.O. Box 1168 When was the debt incurred? Raleigh, NC 27602 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Contingent Debtor 1 only Debtor 2 only Unliquidated Debtor 1 and Debtor 2 only Disputed At least one of the debtors and another Type of PRIORITY unsecured claim: ☐Check if this claim is for a community debt Is the claim subject to offset? Domestic support obligations No Taxes and certain other debts you owe the government

Claims for death or personal injury while you were intoxicated

tax debt

□Other. Specify

□Yes

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ebtor 1 Scott Allen Randolph		Case numbe	er (if know)		
4					
Randolph County Tax Dept.	Last 4 digits of account number XX	x \$	\$	0.00 \$	\$0.0
Priority Creditor's Name 725 McDowell Road Asheboro, NC 27203	When was the debt incurred?				
Number Street City State Zlp Code	As of the date you file, the claim is: Cl	eck all that apply	y		
Who incurred the debt? Check one.	Contingent				
Debtor 1 only					
Debtor 2 only	Unliquidated				
Debtor 1 and Debtor 2 only	Disputed				
At least one of the debtors and another	Towns of BRIGRITY or assessed alabora				
☐Check if this claim is for a community debt	Type of PRIORITY unsecured claim:				
Is the claim subject to offset?	Domestic support obligations				
No	Taxes and certain other debts you own	the government			
□ Yes	Claims for death or personal injury whi	le you were intoxic	cated		
	☐Other. Specify				
	notice on	ly			
rt 2: List All of Your NONPRIORITY Un	secured Claims				
 List all of your nonpriority unsecured claims unsecured claim, list the creditor separately for than one creditor holds a particular claim, list the part of the control of t	each claim. For each claim listed, identify v	hat type of claim i	it is. Do not list claims al	ready included in F	art 1. If more
Part 2.				Total clai	m
American Express	Last 4 digits of account number	499x		\$	615.0
Priority Creditor's Name PO Box 981537	When was the debt incurred?	2012			
El Paso, TX 79998 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that a	pply		
Who incurred the debt? Check one.	Contingent				
Debtor 1 only	_pontingent				
Debtor 2 only	Unliquidated				
Debtor 1 and Debtor 2 only	Disputed				
☐At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:			
☐Check if this claim is for a community debt	☐Student loans				
Is the claim subject to offset?	Dbligations arising out of a separa	ation agreement or	r divorce that you did		
■No	Debts to pension or profit-sharing	plans, and other s	similar debts		
□ Yes	Other. Specify Credit	card purcha	ses		
Austin Electric	Last 4 digits of account number			\$	2,700.0
Priority Creditor's Name	East + aights of account number	-		Ψ	_,
157 Beacon Ridge PI Thomasville, NC 27360	When was the debt incurred?	2015			
Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that a	ylaa		

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Debtor	1 Scott Allen Randolph		Case number (if know)		
	Who incurred the debt? Check one.	Contingent			
	Debtor 1 only	_			
	Debtor 2 only	Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecur	red claim:		
	Check if this claim is for a community	☐Student loans			
	debt				
	Is the claim subject to offset?	Dbligations arising out of a sepanot report as priority claims	aration agreement or divorce that you did		
	No	Debts to pension or profit-sharing	ng plans, and other similar debts		
	∐ Yes	Other. Specify busi	ness contract		
4.3	Bank of America	Last 4 digits of account number		\$	1,938.00
	Priority Creditor's Name	East 4 digits of associate number		Ψ	,
	PO Box 982238 El Paso, TX 79998	When was the debt incurred?	2012		
	Number Street City State Zlp Code	As of the date you file, the clain	n is: Check all that apply		
	Who incurred the debt? Check one.	Contingent			
	Debtor 1 only				
	Debtor 2 only	Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed			
	☐At least one of the debtors and another	Type of NONPRIORITY unsecur	ed claim:		
	Check if this claim is for a community debt	☐Student loans			
	Is the claim subject to offset?	Dbligations arising out of a sepanot report as priority claims	aration agreement or divorce that you did		
	No	Debts to pension or profit-sharing	ng plans, and other similar debts		
	∐Yes	Other. Specify Cred	lit card purchases		
4.4	Barclays Bank of Delaware	Last 4 digits of account number	- 568x	\$	9,300.00
	Priority Creditor's Name				
	PO Box 8803 Wilmington, DE 19899	When was the debt incurred?	2012		
	Number Street City State Zlp Code	As of the date you file, the clain	n is: Check all that apply		
	Who incurred the debt? Check one.	Contingent			
	Debtor 1 only	_			
	Debtor 2 only	Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed			
	☐At least one of the debtors and another	Type of NONPRIORITY unsecur	ed claim:		
	Check if this claim is for a community debt	☐Student loans			
	Is the claim subject to offset?	Dbligations arising out of a sep- not report as priority claims	aration agreement or divorce that you did		
	No	Debts to pension or profit-sharing	ng plans, and other similar debts		
	<u></u> Yes	Other. Specify Cred	lit card purchases		
4.5	Chase Card Services	Last 4 digits of account number	r 266x	\$	4,118.00
	Priority Creditor's Name PO Box 15298	When was the debt incurred?	2012		
	Wilmington, DE 19850	As of the date you file the clain	a is. Chack all that apply		

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Debtor	Scott Allen Randolph		Case number (if know)		
	Who incurred the debt? Check one.	☐Contingent			
	Debtor 1 only				
	Debtor 2 only	Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:		
	Check if this claim is for a community	Student loans			
	debt	_			
	Is the claim subject to offset?	Dbligations arising out of a separa not report as priority claims	ation agreement or divorce that you did		
	■No	Debts to pension or profit-sharing	plans, and other similar debts		
	<u></u> Yes	Other. Specify Credit	card purchases		
4.6	CitiCards/Citibank	Last 4 digits of account number	424x	\$	833.00
	Priority Creditor's Name	-		· —	
	PO Box 6241 Sioux Falls, SD 57117	When was the debt incurred?	2012		
	Number Street City State Zlp Code	As of the date you file, the claim is	s: Check all that apply		
	Who incurred the debt? Check one.	Contingent			
	Debtor 1 only	-			
	Debtor 2 only	Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed			
	☐At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:		
	Check if this claim is for a community debt	☐Student loans			
	Is the claim subject to offset?	Dbligations arising out of a separa	ation agreement or divorce that you did		
	No	Debts to pension or profit-sharing	plans, and other similar debts		
	<u></u> Yes	Other. Specify Credit	card purchases		
4.7	Credit Bureau	Loot 4 digits of appault number	xxx	c	0.00
	Priority Creditor's Name	Last 4 digits of account number		\$	0.00
	P.O. Box 26140	When was the debt incurred?			
	Greensboro, NC 27402 Number Street City State Zlp Code	As of the date you file, the claim is	s: Check all that apply		
	Who incurred the debt? Check one.	_	,		
	Debtor 1 only	Contingent			
	Debtor 2 only	Unliquidated			
	Debtor 1 and Debtor 2 only	□Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:		
	Check if this claim is for a community debt	Student loans			
	Is the claim subject to offset?	Dbligations arising out of a separa	ation agreement or divorce that you did		
	No	Debts to pension or profit-sharing	plans, and other similar debts		
	∐Yes	Other. Specify notice	only		
4.8	Credit One Bank	Land A district of any of the second	447x	•	600.00
	Priority Creditor's Name	Last 4 digits of account number	TT1A	\$	000.00
	PO Box 98873 Las Vegas, NV 89193	When was the debt incurred?	2013		
	Number Street City State Zlp Code	As of the date you file, the claim is	s: Check all that apply		

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Debtor	Scott Allen Randolph		Case number (if know)		
	Who incurred the debt? Check one.	☐Contingent			
	Debtor 1 only				
	Debtor 2 only	Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:		
	Check if this claim is for a community	Student loans			
	debt	_			
	Is the claim subject to offset?	Dbligations arising out of a separa not report as priority claims	ation agreement or divorce that you did		
	No	Debts to pension or profit-sharing	plans, and other similar debts		
	<u></u> Yes	Other. Specify Credit	card purchases		
4.9	Discover Bank	Last 4 digits of account number	011x	\$	800.00
	Priority Creditor's Name	Edot 4 digito of doodant number		Ψ	
	PO Box 15316 Wilmington, DE 19850	When was the debt incurred?	2011		
	Number Street City State Zlp Code	As of the date you file, the claim is	s: Check all that apply		
	Who incurred the debt? Check one.	Contingent			
	Debtor 1 only	-			
	Debtor 2 only	Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed			
	☐At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:		
	Check if this claim is for a community debt	Student loans			
	Is the claim subject to offset?	☐Obligations arising out of a separanot report as priority claims	ation agreement or divorce that you did		
	No	Debts to pension or profit-sharing	plans, and other similar debts		
	<u></u> Yes	Other. Specify Credit	card purchases		
4.10	Elan Financial Services	Last 4 digits of account number	037x	\$	195.00
	Priority Creditor's Name	-		<u> </u>	
	PO Box 108 Saint Louis, MO 63166	When was the debt incurred?	2011		
	Number Street City State Zlp Code	As of the date you file, the claim is	s: Check all that apply		
	Who incurred the debt? Check one.	☐Contingent			
	Debtor 1 only				
	Debtor 2 only	Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed			
	☐At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:		
	Check if this claim is for a community debt	Student loans			
	Is the claim subject to offset?	Dbligations arising out of a separanot report as priority claims	ation agreement or divorce that you did		
	No	Debts to pension or profit-sharing	plans, and other similar debts		
	<u></u> res	Other. Specify Credit	card purchases		
4.11	Elan Financial Services		037x		18,183.00
	Priority Creditor's Name	Last 4 digits of account number		\$	10,100.00
	PO Box 108 Saint Louis, MO 63166	When was the debt incurred?	2994		
	Number Street City State Zlp Code	As of the date you file, the claim is	s: Check all that apply		

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Debtor	1 Scott Allen Randolph		Case number (if know)		
	Who incurred the debt? Check one.	Contingent			
	Debtor 1 only				
	Debtor 2 only	Unliquidated			
	Debtor 1 and Debtor 2 only	□Disputed			
	☐At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:		
	Check if this claim is for a community	☐Student loans			
	debt Is the claim subject to offset?				
	is the claim subject to onset:	not report as priority claims	ation agreement or divorce that you did		
	No	Debts to pension or profit-sharing	plans, and other similar debts		
	∐Yes	Other. Specify person	nal loan		
4.12	Home Depot/CBNA	1 4 d dinita - 6	035x	•	5,847.00
	Priority Creditor's Name	Last 4 digits of account number		\$	3,047.00
	PO Box 6497 Sioux Falls, SD 57117-6497	When was the debt incurred?	2009		
	Number Street City State Zlp Code	As of the date you file, the claim is	s: Check all that apply		
	Who incurred the debt? Check one.	Contingent			
	Debtor 1 only				
	Debtor 2 only	Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed			
	☐At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:		
	Check if this claim is for a community debt	☐Student loans			
	Is the claim subject to offset?	Dbligations arising out of a separanot report as priority claims	ation agreement or divorce that you did		
	No	Debts to pension or profit-sharing	plans, and other similar debts		
	<u></u> Yes	Other. Specify Credit	card purchases		
4.13	LVNV Funding LLC	Last 4 digits of account number	447x	\$	574.00
	Priority Creditor's Name	M/L the debt ! 10	0045		
	PO Box 10497 Greenville, SC 29603	When was the debt incurred?	2015		
	Number Street City State Zlp Code	As of the date you file, the claim is	s: Check all that apply		
	Who incurred the debt? Check one.	Contingent			
	Debtor 1 only				
	Debtor 2 only	Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed			
	☐At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:		
	☐Check if this claim is for a community debt	Student loans			
	Is the claim subject to offset?	Dbligations arising out of a separa not report as priority claims	ation agreement or divorce that you did		
	No	Debts to pension or profit-sharing	plans, and other similar debts		
	∐Yes	Other. Specify Credit	card purchases		
4.14	Sheffield Financial	Last 4 digits of account number	070x	\$	3,934.00
	Priority Creditor's Name PO Box 1847	When was the debt incurred?		Ψ	
	Wilson, NC 27894	which was the dept incurred?	2011		
	Number Street City State Zlp Code	As of the date you file, the claim is	s: Check all that apply		

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Debtor	1 Scott Alle	en Randolph		Case	number (if know)				
	Who incurred	the debt? Check one.	Contingent						
	Debtor 1 only	/							
	Debtor 2 only	,	Unliquidated						
	Debtor 1 and	Debtor 2 only							
		of the debtors and another	Type of NONPRIORITY unsecui	red claim:					
		claim is for a community	☐Student loans						
	debt	, o.u,							
	Is the claim su	bject to offset?	□Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
	No		Debts to pension or profit-sharing plans, and other similar debts						
	∐Yes		Other. Specify pers	onal loa	n				
4.15	Verizon Wi	reless	Last 4 digits of account numbe	r 199x		9		315.00	
	Priority Creditor					<u> </u>			
	PO Box 260	055 s, MN 55426	When was the debt incurred?	2004					
		City State Zlp Code	As of the date you file, the clair	n is: Check	all that apply				
	Who incurred	the debt? Check one.	Contingent						
	Debtor 1 only								
	Debtor 2 only		Unliquidated						
	_ `		_						
	Debtor 1 and	•	☐Disputed Type of NONPRIORITY unsecui	red claim·					
		of the debtors and another	<u></u>	ou olulli.					
	debt	claim is for a community	☐Student loans						
	Is the claim su	bject to offset?	Dbligations arising out of a sep not report as priority claims	aration agre	ement or divorce that	you did			
	No		Debts to pension or profit-shari	ng plans, an	d other similar debts				
	∐Yes		Other. Specify Utili	ties/Cabl	e/Phone				
Part 3: 5. Use th			bt That You Already Listed bout your bankruptcy, for a debt the	at you alrea	dy listed in Parts 1 o	or 2. For example, if a	collecti	on agency is	
more	than one credite		eone else, list the original creditor i listed in Parts 1 or 2, list the additions spage.						
Name	Address	,	On which entry in Part 1 or	r Part2 di	id vou list the or	riginal creditor?			
-NONE			Line of (Check one):	Part 1	: Creditors with F : Creditors with N	Priority Unsecured	d Claim		
			Last 4 digits of account nu						
Part 4:	Add the A	mounts for Each Type of U	nsecured Claim						
6. Total t		certain types of unsecured clai	ms. This information is for statistic	al reporting	purposes only. 28 U	J.S.C. §159. Add the a	amounts	for each type	
					Total claim				
Total cla	6a.	Domestic support obligations	5	6a.	\$	0.00			
from P		Taxes and certain other debt	s you owe the government	6b.	\$	0.00			
	6c.	· · · · · · · · · · · · · · · · · · ·	injury while you were intoxicated	6c.	\$	0.00			
	6d.	Otner. Add all other priority uns	secured claims. Write that amount her	re. 6d.	\$	0.00			
	6e.	Total. Add lines 6a through 6d.		6e.	\$	0.00	7		
		-							
	6f.	Student loans		6f.	Total Claim \$	0.00			
Total cla	aims				*	0.00			
from P	art 2 6g.	Obligations arising out of a s did not report as priority clair	eparation agreement or divorce tha ms	it you 6g.	\$	0.00			
	6h.		aring plans, and other similar debts		\$	0.00			

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Debtor 1 Scott Allen Randolph

Case number (if know)

6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 6i. \$ 49,952.00

Total. Add lines 6f through 6i. 6j. \$ 49,952.00

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Fill in this infor				
Debtor 1	Scott Allen Rande	olph		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	MIDDLE DISTRICT OF	NORTH CAROLINA	
Case number				
(if known)				☐ Check if this is
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ■No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	Name, Number	whom you have th , Street, City, State and ZIF	e contract or lease ^o Code	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.4	,				
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.5	City		State	ZIP Code	
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>

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Fill in this infor	mation to identify your	casa:			
Debtor 1	Scott Allen Rando	Middle Name	Last Name		
Debtor 2	First Name	Middle None	Loot Nome		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	MIDDLE DISTRICT OF	NORTH CAROLINA		
Case number (if known)					☐ Check if this is an amended filing
Official Fo	orm 106H • H: Your Cod	ebtors			12/15
people are filing fill it out, and nu your name and o	together, both are equipmer the entries in the case number (if known)	ally responsible for sup boxes on the left. Attac . Answer every question	plying correct information the Additional Page to	n. If more space is r this page. On the to	ate as possible. If two married needed, copy the Additional Page p of any Additional Pages, write
□No			·		
■Yes					
			roperty state or territory? uerto Rico, Texas, Washing		y states and territories include
■No. Go to	line 3.				
<u></u> Yes. Did y	our spouse, former spous	se, or legal equivalent live	with you at the time?		
in line 2 ag	ain as a codebtor only i), Schedule E/F (Official	f that person is a guarai	ntor or cosigner. Make su	ire you have listed t	g with you. List the person show he creditor on Schedule D (Officia Schedule E/F, or Schedule G to
	nn 1: Your codebtor Number, Street, City, State and ZI	P Code		Column 2: The cre Check all schedule	ditor to whom you owe the debt s that apply:
2513	lolph Disaster Restor Surrett Drive dale, NC 27263	ration, Inc.		■Schedule D, lin □Schedule E/F, I □Schedule G Ally Financial	

Schedule H: Your Codebtors

Fill	in this information to identify your o	220.							
	btor 1 Scott Allen								
1	otor 2 ouse, if filing)					-			
Uni	ited States Bankruptcy Court for the	e: MIDDLE DISTRICT C	F NORTH	CAROLINA	<u>.</u>				
(If kr	se number fficial Form 106l		-				13 income a	d filing ent showing postpe as of the following	
	chedule I: Your Inc	om o					MM / DD/ Y	YYY	12/15
sup spo atta	as complete and accurate as pos plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not fili Ir spouse is not filing w	ng jointly ith you, d	, and your s o not includ	pouse is le inform	s living w nation ab	ith you, incl out your spe	ude information a ouse. If more space	about your ce is needed,
1.	Fill in your employment information.		Debtor	1			Debtor 2	or non-filing spo	use
	If you have more than one job, attach a separate page with information about additional	Employment status	·	■Employed Not employed		□Employed □Not employed			
	employers.	Occupation							
	Include part-time, seasonal, or self-employed work.	Employer's name	Rando , Inc.	lph Disast	er Rest	oration			
	Occupation may include student or homemaker, if it applies.	Employer's address		urrett Driv ale, NC 27	-				
		How long employed t	here?	3 years					
Par	t 2: Give Details About Mo	nthly Income							
spou	mate monthly income as of the cuse unless you are separated. The or your non-filing spouse have me space, attach a separate sheet to	ore than one employer, c	,	J	•	,			3
	o operato, analon a doparato difetiti					For [Debtor 1	For Debtor 2 or non-filing spou	
2.	List monthly gross wages, sala deductions). If not paid monthly,				2.	\$	3,200.00	\$	N/A

0.00

3,200.00

+\$

\$

N/A

N/A

Estimate and list monthly overtime pay.

Calculate gross Income. Add line 2 + line 3.

Deb	tor 1	Scott Allen Randolph		С	ase nur	mber (<i>if kı</i>	nown)				
				ì	For De	ebtor 1			Debtor filing s	2 or	
	Cop	by line 4 here	4.		\$	3,200	0.00	\$	9	N/A	<u> </u>
5.	l iet	all payroll deductions:									
J.	5a.	Tax, Medicare, and Social Security deductions	5a.		\$		0.00	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b.		\$		0.00	\$-		N/A	_
	5c.	Voluntary contributions for retirement plans	5c.		\$		0.00	\$		N/A	
	5d.	Required repayments of retirement fund loans	5d.	l. :	\$	(0.00	\$		N/A	
	5e.	Insurance	5e.		\$	(0.00	\$		N/A	<u> </u>
	5f.	Domestic support obligations	5f.		\$		0.00	\$		N/A	_
	5g.	Union dues	5g.		\$		0.00	\$		N/A	_
	5h.	Other deductions. Specify:	_ 5h.	1.+	\$		0.00	+ \$		N/A	_
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	5	§		0.00	\$		N/A	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	5	§	3,200	0.00	\$		N/A	<u>\</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total			•			•			
	O.L.	monthly net income.	8a.		\$		0.00	\$		N/A	_
	8b. 8c.	Interest and dividends Family support payments that you, a non-filing spouse, or a dependent	8b.		\$		0.00	\$		N/A	<u>\</u>
	8d. 8e.	regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security	8c. 8d. 8e.	l. :	\$ \$	(0.00 0.00 0.00	\$ \$		N/A N/A N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:			\$		0.00	\$ \$		N/A	_
	8g.	Pension or retirement income	8g	. :	\$	(0.00	\$		N/A	
	8h.	Other monthly income. Specify:	_ 8h	.+	\$	(0.00	+ \$		N/A	<u>\</u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		(0.00	\$		N/	A
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	3.2	200.00	+ \$		N/A	= \$	3,200.00
10.		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		Ψ_	3,2	200.00			11//		3,200.00
11.	State Included the other Double	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not scify:	depe							le J. +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The restet that amount on the Summary of Schedules and Statistical Summary of Certallies							12.	\$	3,200.00
13.	Do	you expect an increase or decrease within the year after you file this form	?							Combi	ined ly income
		No.									

Official Form 106I Schedule I: Your Income page 2

Fill	in this information to identify your case	:				
Deb	Scott Allen Randol				k if this is:	
1	tor 2 ouse, if filing)				A supplement snow 13 expenses as of	wing postpetition chapter the following date:
Unit	ed States Bankruptcy Court for the: MIDE	LE DISTRICT OF NORTH C	CAROLINA	1	MM / DD / YYYY	
1	e number nown)					
	fficial Form 106J					
Be info	chedule J: Your Expe as complete and accurate as possib primation. If more space is needed, a mber (if known). Answer every quest	le. If two married people a ttach another sheet to this				
Par 1.	Describe Your Household Is this a joint case?					
	■No. Go to line 2. Yes. Does Debtor 2 live in a sepa	rate household?				
	□No □Yes. Debtor 2 must file Offi	cial Form 106J-2, <i>Expenses</i>	for Separate Househo	old of Debto	or 2.	
2.	Do you have dependents? ■No					
	Do not list Debtor 1	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2	ship to	Dependent's age	Does dependent live with you?
	Do not state the dependents names.					□No □Yes □No □Yes □No □Yes
3.	Do your expenses include expenses of people other than yourself and your dependents?	■No □Yes				□No □Yes
Est	Estimate Your Ongoing Mon imate your expenses as of your ban benses as of a date after the bankrup licable date.	kruptcy filing date unless y				
the	lude expenses paid for with non-cas value of such assistance and have ficial Form 106l.)				Your exp	enses
4.	The rental or home ownership exp payments and any rent for the ground		nclude first mortgage	4. \$		1,268.00
	If not included in line 4:					
	4a. Real estate taxes4b. Property, homeowner's, or ren4c. Home maintenance, repair, an			4a. \$ 4b. \$ 4c. \$		233.00 50.00 25.00
	4d. Homeowner's association or co			4d. \$		0.00

5. Additional mortgage payments for your residence, such as home equity loans

0.00

Debtor 1	Scott Allen Randolph	Case num	ber (if known)	
C	sion:			<u></u>
6. Util i 6a.	ties: Electricity, heat, natural gas	6a.	\$	175.00
6b.	Water, sewer, garbage collection	6b.	·	50.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.		80.00
6d.	Other. Specify:	6d.	·	-
		ou. 7.	· -	0.00
	d and housekeeping supplies		·	250.00
	dcare and children's education costs	8.	\$	0.00
	hing, laundry, and dry cleaning	9.	\$	25.00
	sonal care products and services	10.	\$	25.00
	ical and dental expenses	11.	\$	0.00
	nsportation. Include gas, maintenance, bus or train fare.	12.	¢	300.00
	not include car payments.			
	ertainment, clubs, recreation, newspapers, magazines, and books	13.	·	0.00
	ritable contributions and religious donations	14.	\$	0.00
5. Ins ı				
	not include insurance deducted from your pay or included in lines 4 or 20.	45-	Φ.	
	Life insurance	15a.		0.00
	Health insurance	15b.	·	700.00
	Vehicle insurance	15c.	· -	25.00
15d	Other insurance. Specify:	15d.	\$	0.00
6. Tax	es. Do not include taxes deducted from your pay or included in lines 4 or 20.			
Spe	·	16.	\$	0.00
	allment or lease payments:			
	Car payments for Vehicle 1	17a.	·	0.00
17b	Car payments for Vehicle 2	17b.	\$	0.00
17c	Other. Specify:	17c.	\$	0.00
17d	Other. Specify:	17d.	\$	0.00
8. Yo u	r payments of alimony, maintenance, and support that you did not report as	<u> </u>	_	0.00
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.		0.00
9. Oth	er payments you make to support others who do not live with you.		\$	0.00
Spe		19.		
	er real property expenses not included in lines 4 or 5 of this form or on Sch			
20a	Mortgages on other property	20a.		0.00
20b	Real estate taxes	20b.	\$	0.00
20c	Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e	Homeowner's association or condominium dues	20e.	\$	0.00
1. Oth	er: Specify:	21.	+\$	0.00
•			, ,	0.00
22. Cal	culate your monthly expenses			
22a	Add lines 4 through 21.		\$	3,206.00
22b	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	Add line 22a and 22b. The result is your monthly expenses.		\$	3,206.00
	and			0,200.00
	culate your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	3,200.00
23b	Copy your monthly expenses from line 22c above.	23b.	-\$	3,206.00
23c	Subtract your monthly expenses from your monthly income.			C 00
	The result is your monthly net income.	23c.	\$	-6.00
	ou expect an increase or decrease in your expenses within the year after you			
	example, do you expect to finish paying for your car loan within the year or do you expect your refrection to the torms of your mortage?	mortgage pa	ayment to increase of	or decrease because of a
	fication to the terms of your mortgage?			
■N				
□Ye	es. Explain here:			

Fill in this in	formation to identify your	case:			
Debtor 1	Scott Allen Rande	olph			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	MIDDLE DISTRICT OF	NORTH CAROLINA		
Case number					
(if known)					☐ Check if this is an amended filing
Declara	orm 106Dec ation About a				12/15
obtaining mo		n connection with a ban			ement, concealing property, or 00, or imprisonment for up to 20
S	Sign Below				
Did you	pay or agree to pay some	one who is NOT an attor	rney to help you fill out	bankruptcy forms?	
■ N	No				
□ Y	es. Name of person			ttach <i>Bankruptcy Petiti</i> d Signature (Official Fo	ion Preparer's Notice, Declaration, orm 119).
Under pe	enalty of perjury, I declare	that I have read the sum	nmary and schedules fil	ed with this declarati	on and
	are true and correct.		•		
X /s/ S	Scott Allen Randolph		Χ		
Sco	tt Allen Randolph ature of Debtor 1		Signature o	f Debtor 2	

Date ____

Date **January 20, 2016**

Fil	I in this inform	nation to identify you	r case:			
De	btor 1	Scott Allen Rand	<u> </u>			
Do	btor 2	First Name	Middle Name	Last Name		
	ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Bar	nkruptcy Court for the:	MIDDLE DISTRICT OF N	IORTH CAROLINA		
Ca	se number					
	nown)					Check if this is an
					a	mended filing
<u>O</u> 1	fficial For	rm 107				
St	atement	of Financial	Affairs for Individ	luals Filing for B	ankruptcy	12/15
Be.	as complete a	nd accurate as possi	ble. If two married people	are filing together, both are	equally responsible for su	onlying correct
info	rmation. If m	ore space is needed,	attach a separate sheet to		y additional pages, write yo	
nur	nber (if known	n). Answer every que	stion.			
Pa	rt 1: Give D	etails About Your Ma	arital Status and Where You	u Lived Before		
1.	What is your	current marital statu	ıs?			
	,					
	■ Married					
	☐ Not mar	riea				
2.	During the la	ist 3 years, have you	lived anywhere other than	where you live now?		
	■ No					
		t all of the places you	lived in the last 3 years. Do n	ot include where you live nov	v.	
	Debtor 1 Pri	ior Address:	Dates Debtor 1	Debtor 2 Prior Ad	dress.	Dates Debtor 2
	20000		lived there	300001 2 1 1101 7 10		lived there
3.	Within the la	st 8 years, did you e	ver live with a spouse or le	gal equivalent in a commu	nity property state or territor	r v? (Community property
stat					ico, Texas, Washington and \	
	■ No					
		ke sure you fill out Sci	hedule H: Your Codebtors (O	fficial Form 106H).		
		·	`	,		
Pa	rt 2 Explain	n the Sources of You	r Income			
4.	Did you have	any income from er	nnlovment or from operation	ng a business during this v	ear or the two previous cale	endar vears?
	Fill in the tota	I amount of income yo	ou received from all jobs and	all businesses, including part	-time activities.	
	If you are filin	g a joint case and you	have income that you receive	e together, list it only once u	nder Debtor 1.	
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and	Check all that apply.	(before deductions
				exclusions)		and exclusions)
		of current year until	□Wages, commissions,	\$3,200.00	□Wages, commissions,	
tne	e date you filed	d for bankruptcy:	bonuses, tips		bonuses, tips	
			■Operating a business		☐Operating a business	

Official Form 107

Del	otor 1	Sco	ott Allen F	Randolph				C	Case n	umber (if known)		
					Debtor 1					Debtor 2		
					Sources of Check all the		(befo	ss income are deductions and asions)		Sources of inc Check all that a		Gross income (before deductions and exclusions)
			dar year: December	31, 2015)	□Wages, co			\$36,000.0	_	□Wages, comr conuses, tips	nissions,	
					Operating	a business			I	□Operating a b	usiness	
			ar year be December		□Wages, co			\$32,308.0		□Wages, comr conuses, tips	nissions,	
					■Operating	a business			I	□Operating a b	usiness	
	unempligamblin	oyn ng a ch s	nent, and o nd lottery v ource and t	ther public b vinnings. If y the gross inc	enefit payment ou are filing a j	s; pensions; re oint case and y	ntal inco ou have	of other income a me; interest; divic income that you not include incon	dends; receiv	money collecte ed together, list	ed from laws it only once	uits; royalties; and
	☐ Ye	es. F	Fill in the de	etails.								
					Debtor 1				ı	Debtor 2		
					Sources of Describe bel		(befo	ss income ore deductions and outsions)		Sources of inc Describe below		Gross income (before deductions and exclusions)
Par	rt 3: L	ist	Certain Pa	yments You	ı Made Before	You Filed for	Bankru	ptcy				
6.	Are eitl		Neither De	ebtor 1 nor	Debtor 2 has p	arily consume orimarily cons nily, or househo	umer de	ebts. Consumer d	debts a	re defined in 11	U.S.C. § 10	01(8) as "incurred by a
			During the	90 days bef	,	or bankruptcy, d	did you pa	ay any creditor a t	total of	f \$6,225* or mo	re?	
			☐ Yes * Subject	paid that c	reditor. Do not payments to a	include payme an attorney for t	nts for de	omestic support o	obligati	ions, such as c	hild support a	the total amount you and alimony. Also, do t.
	■ Ye	es.				orimarily cons or bankruptcy, d		ebts. ay any creditor a t	total o	f \$600 or more′	?	
			■ No.	Go to line	7.							
			☐ Yes	include pa		nestic support o						at creditor. Do not include payments to
	Credit	or's	Name and	d Address	С	Dates of payme	ent	Total amount paid		Amount you still owe	Was this p	payment for
7.	Insiders corpora includir support	s ind ition ig o and	clude your r is of which	elatives; any you are an c	general partner, director,	ers; relatives of person in cont	f any ger trol, or ov	ent on a debt you neral partners; par wner of 20% or mo	u owe rtnersh ore of	d anyone who nips of which yo their voting sec	ou are a gene curities; and a	
	■ No		ist all payn	nents to an i	nsider							

Official Form 107

Total amount

paid

Amount you

still owe

Dates of payment

Insider's Name and Address

Reason for this payment

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Case number (if known)

8.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cos		yments or transfer a	iny property on a	account of a d	ebt that benefited an		
	■ No							
	☐ Yes. List all payments to an insider							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name		
Par	t 4: Identify Legal Actions, Repossession	s, and Foreclosures						
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes.							
	■ No □ Yes. Fill in the details.							
	Case title Case number	Nature of the case	Court or agency		Status of th	e case		
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below No		erty repossessed, fo	oreclosed, garni	shed, attached	d, seized, or levied?		
	☐ Yes. Fill in the information below.							
	Creditor Name and Address	Describe the Property Explain what happene		Date		Value of the property		
11.	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details.							
	Creditor Name and Address	Describe the action the	e creditor took	Date taker	action was	Amount		
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or a		erty in the possessi	on of an assign	ee for the bend	efit of creditors, a		
	■ No □ Yes							
Par	t 5: List Certain Gifts and Contributions							
13.	Within 2 years before you filed for bankrup ■ No	tcy, did you give any gift	ts with a total value	of more than \$6	00 per person	?		
	Yes. Fill in the details for each gift.							
	Gifts with a total value of more than \$600 per person	Describe the gifts		the g	s you gave lifts	Value		
	Person to Whom You Gave the Gift and Address:							
14.	Within 2 years before you filed for bankrup ■ No		ts or contributions v	with a total value	e of more than	\$600 to any charity		
	Yes. Fill in the details for each gift or con		u a a mánilh vá - d	D. (W-1		
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	al Describe what you	u contributed		s you ributed	Value		
	, , ,							

Debtor 1 Scott Allen Randolph

Der	Scott Allen Kandolphi		Dase Humber (# known)					
Par	t 6: List Certain Losses							
15.	Within 1 year before you filed for bankruldisaster, or gambling?	ptcy or since you filed for bankruptcy, did y	you lose anything because of the	eft, fire, other				
	■ No □ Yes. Fill in the details.							
	Describe the property you lost and	Describe any insurance coverage for the le	_	Value of property				
		Include the amount that insurance has paid. I pending insurance claims on line 33 of <i>Scheol Property</i> .		lost				
Par	t 7: List Certain Payments or Transfers	s						
16.	consulted about seeking bankruptcy or p	ptcy, did you or anyone else acting on your preparing a bankruptcy petition? preparers, or credit counseling agencies for se						
	□ No							
	Yes. Fill in the details.							
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	Description and value of any prop transferred	Date payment or transfer was made	Amount of payment				
	B. Peter Jarvis 10821 N. Main Street Archdale, NC 27263		1/18/2016	\$1,227.00				
17.		ptcy, did you or anyone else acting on you ditors or to make payments to your creditor you listed on line 16.		erty to anyone who				
	■ No							
	☐ Yes. Fill in the details.							
	Person Who Was Paid Address	Description and value of any prop transferred	Date payment or transfer was made	Amount of payment				
18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.							
	■ No □ Yes. Fill in the details.							
	Person Who Received Transfer Address	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made				
	Person's relationship to you		para in exercing					
19.	Within 10 years before you filed for bank beneficiary? (These are often called asset ■ No ■ Yes. Fill in the details.	truptcy, did you transfer any property to a s -protection devices.)	elf-settled trust or similar device	e of which you are a				
	Name of trust	Description and value of the prope	erty transferred	Date Transfer was				
				made				

Debtor 1	Scott	Allen	Randolph
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Case number (if known)

Par	List of Certain Financial Accounts, In	struments, Safe Depos	sit Boxes, and Sto	orage Unit	s	
20.	 Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. 					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accour instrument	nt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed fo	or bankruptcy, an	y safe dep	oosit box or other depo	sitory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)		Describe t	the contents	Do you still have it?
22.	Have you stored property in a storage unit	or place other than you	ır home within 1 y	year befor	e you filed for bankrup	tcy
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe t	the contents	Do you still have it?
Par	19: Identify Property You Hold or Control	for Someone Else				
23.	Do you hold or control any property that so for someone.	omeone else owns? Inc	lude any property	y you borr	owed from, are storing	for, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe t	the property	Value
Par	10: Give Details About Environmental Inf	ormation				
For	the purpose of Part 10, the following definit	ions apply:				
	Environmental law means any federal, state toxic substances, wastes, or material into tregulations controlling the cleanup of these	he air, land, soil, surfa	ce water, ground			
	Site means any location, facility, or propert to own, operate, or utilize it, including disp	•	environmental la	aw, wheth	er you now own, opera	te, or utilize it or used
	Hazardous material means anything an envi	vironmental law defines	s as a hazardous	waste, ha	zardous substance, tox	ic substance,
Rep	ort all notices, releases, and proceedings th	nat you know about, re	gardless of when	they occu	ırred.	
24.	Has any governmental unit notified you that	t you may be liable or	potentially liable (under or i	n violation of an enviro	nmental law?
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental u Address (Number,	nit Street, City, State and	Enviro know i	nmental law, if you it	Date of notice

Case number (if known)

25.	Hav	ve you notified any governmental uni	t of any	release of hazardous material?				
		No						
		Yes. Fill in the details.						
		nme of site Idress (Number, Street, City, State and ZIP Cod	e)	Governmental unit Address (Number, Street, City, State of ZIP Code)		Environme know it	ental law, if you	Date of notice
26.	Hav	ve you been a party in any judicial or	admini	strative proceeding under any er	nvironr	mental law?	? Include settlements	and orders.
		No Yes. Fill in the details.						
		se Title se Number		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ure of the o	case	Status of the case
Par	111	Give Details About Your Business	or Con	nections to Any Business				
27.	Wit	hin 4 years before you filed for bank	ruptcy,	did you own a business or have	any of	the followi	ng connections to an	y business?
		☐A sole proprietor or self-employe	d in a tr	ade, profession, or other activity	y, eithe	er full-time o	or part-time	
		☐A member of a limited liability co	mpany	(LLC) or limited liability partners	hip (Ll	LP)		
		☐A partner in a partnership						
		—	executi	ve of a corporation				
		☐An owner of at least 5% of the vo		•	n			
		No. None of the above applies. Go	•					
	_	Yes. Check all that apply above and			200			
	Business Name Address (Number, Street, City, State and ZIP Code)			Describe the nature of the business Name of accountant or bookkeeper		Employer	Identification numbe	•
						Do not include Social Security number or ITIN.		
	Rs	andolph Disaster Restoration,	Di	isaster Restoration		Dates business existed EIN: 46-3130518		
	In	· · · · · · · · · · · · · · · · · · ·		al Surratt			2013 - Present	
	Ar	chdale, NC 27263						
28.		hin 2 years before you filed for bank titutions, creditors, or other parties.	ruptcy,	did you give a financial statemer	nt to ar	nyone abou	t your business? Incl	ude all financial
		No Yes. Fill in the details below.						
	Na	ıme	Da	te Issued				
		Idress Imber, Street, City, State and ZIP Code)						
Par	12	: Sign Below						
are t	rue a b	ead the answers on this Statement o and correct. I understand that makir ankruptcy case can result in fines up C. §§ 152, 1341, 1519, and 3571.	g a fals	e statement, concealing propert	y, or o	btaining mo	oney or property by fr	
Sco	ott /	ott Allen Randolph Allen Randolph ure of Debtor 1		Signature of Debtor 2				
Dat	е	January 20, 2016		Date				
Did :		attach additional pages to Your Stat	ement d	of Financial Affairs for Individual	ls Filin	g for Bankr	ruptcy (Official Form 1	07)?
Offici	al Fo	orm 107 St	atement (of Financial Affairs for Individuals Fili	ng for E	Bankruptcy		page

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Deptor 1	Scott Allen Randolph	Case number (if known)	
□Yes			
Did vou no	war agree to now company who is not	a attaunay ta hala yay fill ayt hankuyntay farma?	
Dia you pa	ly or agree to pay someone who is not	n attorney to help you fill out bankruptcy forms?	
□No			
☐Yes. Nan	ne of Person	Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119	₹).

Debtor 1	Scott Allen Randolph	Case number (if known)
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DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date	January 20, 2016	Signature	/s/ Scott Allen Randolph	
		-	Scott Allen Randolph	
			Debtor	

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

Fill in this infor	mation to identify your	case:		
Debtor 1	Scott Allen Rando	olph		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	MIDDLE DISTRICT OF	NORTH CAROLINA	
Case number (if known)				☐ Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- ■creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's Ally Financial	☐Surrender the property.	□No
name:	☐ Retain the property and redeem it.	
Description of 2015 Chevrolet 2500 HD	Retain the property and enter into a Reaffirmation Agreement.	■Yes
property	■Retain the property and [explain]:	
securing debt:	Will continue to make payments according to Contract	
Creditor's BMW Bank of North America name: Description of property 90% NADA securing debt:	■Surrender the property. □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]:	■No □Yes
Creditor's Ocwen Loan Servicing name:	□Surrender the property. □ Retain the property and redeem it.	□No
Description of 11789 Trinity Rd Trinity, NC 27370 Randolph County	Retain the property and enter into a Reaffirmation Agreement.	■Yes

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

prop	erty Appraisal va	lue (4/30/2015)	■Retain the property and [explain]: will continue to make payments according to Note	Page 2
nam		Rd Trinity, NC	□Surrender the property. □Retain the property and redeem it. □Retain the property and enter into a	□No ■Yes
prop	erty 27370 Rand	olph County lue (4/30/2015)	Reaffirmation Agreement. Retain the property and [explain]: will continue to make payments according to Note	
in the ir	unexpired personal prop nformation below. Do not	erty lease that you list list real estate leases.	es ed in Schedule G: Executory Contracts and Une Unexpired leases are leases that are still in effe if the trustee does not assume it. 11 U.S.C. § 30	ect; the lease period has not yet ended.
Descri	be your unexpired persor	al property leases		Will the lease be assumed?
	's name:			□No
Propert	otion of leased ty:			□Yes
	's name:			□No
Descrip Propert	otion of leased ty:			□Yes
	's name:			□No
Descrip Propert	otion of leased ty:			□Yes
	's name:			□No
Descrip Propert	otion of leased ty:			□Yes
	's name:			□No
Descrip Propert	otion of leased ty:			□Yes
	's name:			□No
Descrip Propert	otion of leased ty:			□Yes
	's name:			□No
Descrip Propert	otion of leased ty:			□Yes
Part 3:	Sign Below			
Under p			my intention about any property of my estate th	nat secures a debt and any personal
χ <u>/</u> s	/ Scott Allen Randolph	<u> </u>	X	
	cott Allen Randolph gnature of Debtor 1		Signature of Debtor 2	
Da	ate January 20, 201	6	Date	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Fill in this information to identify your case: Debtor 1 Scott Allen Randolph		Check one box only a Form 122A-1Supp:	s directed in this for	m and in
Debtor 2				
(Spouse, if filing)				
United States Bankruptcy Court for the: Middle District of N	orth Carolina	■1. There is no presu	umption of abuse	
Case number(if known)	Otti Carolina	applies will be r	o determine if a presum made under <i>Chapter 7</i> ricial Form 122A-2).	
			does not apply now be y service but it could ap	
	, ,	□Check if this is ar	n amended filing	
Official Form 122A - 1			· ·	
Chapter 7 Statement of Your Curr	rent Monthly In	come		12/1
·				
Be as complete and accurate as possible. If two married properties is needed, attach a separate sheet to this form. Includitional pages, write your name and case number (if kn you do not have primarily consumer debts or because of Presumption of Abuse Under § 707(b)(2) (Official Form 12) Part 1: Calculate Your Current Monthly Income	lude the line number to w own). If you believe that y qualifying military service	hich the additional info you are exempted from e, complete and file <i>Sta</i>	ormation applies. On a presumption of ab	the top of any use because
, , , , , , , , , , , , , , , , , , ,	h			
1. What is your marital and filing status? Check one only	ly.			
Not married. Fill out Column A, lines 2-11.	hath Calumana A and D. line	- 0.44		
Married and your spouse is filing with you. Fill out	·	es 2-11.		
Married and your spouse is NOT filing with you. Yo	•	National Accord D. Page 6		
Living in the same household and are not legall	•	•		
□Living separately or are legally separated. Fill ou penalty of perjury that you and your spouse are le living apart for reasons that do not include evading	gally separated under nonb	ankruptcy law that appli	es or that you and you	
Fill in the average monthly income that you received fr case. 11 U.S.C. § 101(10A). For example, if you are filing of your monthly income varied during the 6 months, add th income amount more than once. For example, if both spoulf you have nothing to report for any line, write \$0 in the spoul.	on September 15, the 6-more income for all 6 months a uses own the same rental p	onth period would be Ma and divide the total by 6.	rch 1 through August 3 Fill in the result. Do no	1. If the amount of include any
		Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
Your gross wages, salary, tips, bonuses, overtime, a all payroll deductions).	,	\$3,200.00	\$	
3. Alimony and maintenance payments. Do not include page Column B is filled in.		\$	\$	
4. All amounts from any source which are regularly pai of you or your dependents, including child support. from an unmarried partner, members of your household and roommates. Include regular contributions from a spe filled in. Do not include payments you listed on line 3.	Include regular contribution, your dependents, parents,	ns,	\$	
5. Net income from operating a business, profession, of				
	Debtor 1 \$ 0.00			
Gross receipts (before all deductions)	\$ <u>0.00</u> -\$ <u>0.00</u>			
Ordinary and necessary operating expenses		-> \$ 0.00	\$	
Net monthly income from a business, profession, or farm 6. Net income from rental and other real property	Π Φ COPY HEIE	- Ψ <u>0.00</u>	*	
6. Net income from rental and other real property	Debtor 1			
Gross receipts (before all deductions)	\$ 0.00			

Official Form 122A-1

0.00 Copy here -> \$

\$

0.00

0.00

0.00

-\$

\$

Gross receipts (before all deductions)

7. Interest, dividends, and royalties

Ordinary and necessary operating expenses

Net monthly income from rental or other real property

Case number (if known)

				Column A Debtor 1		Column B Debtor 2 or non-filing s		
8.	Unemployment compensation			\$	0.00	\$	•	
	Do not enter the amount if you contend that the amou under the Social Security Act. Instead, list it here:	nt received was a ben	efit					
	For you	. 0	.00					
	For your spouse S							
	Pension or retirement income. Do not include any a benefit under the Social Security Act.			\$	0.00	\$		
10.	Income from all other sources not listed above. Sp Do not include any benefits received under the Social received as a victim of a war crime, a crime against he domestic terrorism. If necessary, list other sources on total below.	Security Act or payme umanity, or internation	ents al or					
	·			\$	0.00	\$		
				\$	0.00	\$		
	Total amounts from separate pages, if any.		+	\$	0.00	\$		
11.	Calculate your total current monthly income. Add I each column. Then add the total for Column A to the t		\$	3,200.00	+ \$_		= \$	3,200.00
					J [Total of incom	current monthly
Part	2: Determine Whether the Means Test Applies	to You					ilicolli	•
12.	Calculate your current monthly income for the year							
	12a. Copy your total current monthly income from line	11		Сор	y line 11 l	nere=>	\$	3,200.00
	Multiply by 12 (the number of months in a year)						X	12
	12b. The result is your annual income for this part of t	he form				12b.	\$	38,400.00
12	Calculate the median family income that applies to	way Follow those str	one:					
13.			ε μ δ.					
	Fill in the state in which you live.	NC						
	Fill in the number of people in your household.	1						
	Fill in the median family income for your state and size	***************************************				13.	\$	41,541.00
	To find a list of applicable median income amounts, gu for this form. This list may also be available at the bar		specified	in the sepa	rate instru	ctions		
14	How do the lines compare?	.,.,						
	14a. Line 12b is less than or equal to line 13. (On the top of page 1, o	check bo	x 1, <i>There i</i> s	no presur	nption of abus	se.	
	Go to Part 3. 14b. Line 12b is more than line 13. On the top Go to Part 3 and fill out Form 122A-2.	of page 1, check box	2, The p	resumption c	of abuse is	determined b	y Form	122A-2.
Part								
	By signing here, I declare under penalty of perjur	v that the information	on this st	tatement and	d in anv att	achments is t	rue and	correct.
		,						
	X /s/ Scott Allen Randolph							
	Scott Allen Randolph Signature of Debtor 1							
	Date January 20, 2016							
	MM / DD / YYYY							
	If you checked line 14a, do NOT fill out or file For	rm 122A-2.						
	If you checked line 14b, fill out Form 122A-2 and	file it with this form.						

Scott Allen Randolph

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

 $\frac{\text{http://www.uscourts.gov/bkforms/bankruptcy_form}}{\text{\underline{s.html\#procedure.}}}$

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. B2030 (Form 2030) (12/15)

United States Bankruptcy CourtMiddle District of North Carolina

In re	Scott Allen Randolph		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPENSATI	ON OF ATTORN	EY FOR DE	EBTOR(S)
C	ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I cer ompensation paid to me within one year before the filing of the perendered on behalf of the debtor(s) in contemplation of or in contemplation.	petition in bankruptcy, or a	agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	1,227.00
	Prior to the filing of this statement I have received		\$	1,227.00
	Balance Due		\$	0.00
2. \$	335.00 of the filing fee has been paid.			
3. T	he source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4. T	he source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5. I	I have not agreed to share the above-disclosed compensation	with any other person unle	ess they are mem	bers and associates of my law firm.
[I have agreed to share the above-disclosed compensation with copy of the agreement, together with a list of the names of the			
6. I	n return for the above-disclosed fee, I have agreed to render lega	al service for all aspects of	the bankruptcy of	ease, including:
b c.	Analysis of the debtor's financial situation, and rendering advi- Preparation and filing of any petition, schedules, statement of Representation of the debtor at the meeting of creditors and co [Other provisions as needed] Negotiations with secured creditors to reduce t reaffirmation agreements and applications as n 522(f)(2)(A) for avoidance of liens on household	affairs and plan which ma onfirmation hearing, and a o market value; exemp eeded; preparation an	y be required; ny adjourned hea otion planning	rings thereof;
7. B	y agreement with the debtor(s), the above-disclosed fee does no Representation of the debtors in any discharge any other adversary proceeding.			es, relief from stay actions or
	CERT	TIFICATION		
	certify that the foregoing is a complete statement of any agreement and any agreement of the complete statement of the com	ent or arrangement for pay	ment to me for re	epresentation of the debtor(s) in
Ja	nuary 20, 2016	/s/ B. Peter Jarvis		
Do	-	B. Peter Jarvis 46149 Signature of Attorney	9	
		Tennant Law Offices	s, PC	
		P.O. Box 4585 Archdale, NC 27263		
		336-431-9155 Fax: 3	36-431-7881	
		Tennantlaw@triad.tv	vcbc.com	
		Name of law firm		

United States Bankruptcy CourtMiddle District of North Carolina

		Middle District of Mortin Caroni	144	
re	Scott Allen Randolph		Case No.	
		Debtor(s)	Chapter	7
	VERI	FICATION OF CREDITOR	MATRIX	
bo	ove-named Debtor hereby verifies that	at the attached list of creditors is true and c	correct to the best	of his/her knowledge.
:	January 20, 2016	/s/ Scott Allen Randolph		
٠.		Scott Allen Randolph		

Signature of Debtor

Ally Financial P.O. Box 380901 Bloomington, MN 55438

American Express PO Box 981537 El Paso, TX 79998

Austin Electric 157 Beacon Ridge Pl Thomasville, NC 27360

Bank of America PO Box 982238 El Paso, TX 79998

Barclays Bank of Delaware PO Box 8803 Wilmington, DE 19899

BMW Bank of North America PO Box 3608 Dublin, OH 43016

Chase Card Services PO Box 15298 Wilmington, DE 19850

CitiCards/Citibank PO Box 6241 Sioux Falls, SD 57117

Credit Bureau P.O. Box 26140 Greensboro, NC 27402

Credit One Bank PO Box 98873 Las Vegas, NV 89193

Discover Bank PO Box 15316 Wilmington, DE 19850 Elan Financial Services PO Box 108 Saint Louis, MO 63166

Employment Security Comm. P.O. Box 26504 Raleigh, NC 27611

Home Depot/CBNA PO Box 6497 Sioux Falls, SD 57117-6497

Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101-7346

LVNV Funding LLC PO Box 10497 Greenville, SC 29603

North Carolina Department of Revenue P.O. Box 1168 Raleigh, NC 27602

Ocwen Loan Servicing 12650 Ingenuity Dr. Orlando, FL 32826

Randolph County Tax Dept. 725 McDowell Road Asheboro, NC 27203

Randolph Disaster Restoration, Inc. 2513 Surrett Drive Archdale, NC 27263

Santander PO Box 841002 Boston, MA 02284

Sheffield Financial PO Box 1847 Wilson, NC 27894

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Verizon Wireless PO Box 26055 Minneapolis, MN 55426